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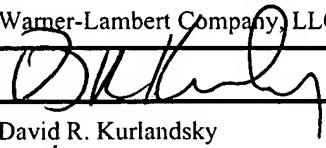
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 <p>TRANSMITTAL FORM (to be used for all correspondence after initial filing)</p>		Application Number	10/771,696
		Filing Date	February 4, 2004
		First Named Inventor	Kazunari Nakao, et al.
		Art Unit	1624
		Examiner Name	Laura Stockton
Total Number of Pages in This Submission	PC9985B		

ENCLOSURES (Check all that apply)

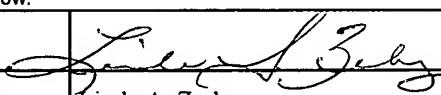
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> </tr> <tr> <td>Authorization to charge the fee and any additional fees as necessary or credit any overpayment to deposit account 23-0455 is hereby given.</td> </tr> </table>			Remarks	Authorization to charge the fee and any additional fees as necessary or credit any overpayment to deposit account 23-0455 is hereby given.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Warner-Lambert Company, LLC		
Signature			
Printed name	David R. Kurlansky		
Date	4/26/05	Reg. No.	41,505

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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IN THE UNITED STATES PATENT & TRADEMARK OFFICE

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APR 29 2005
U. S. PATENT & TRADEMARK OFFICE
JCL

APPLICANT : Kazunari Nakao, et al. EXAMINER : Laura Stockton
SERIAL NO. : 10/771,696 ART UNIT : 1624
FILED : February 4, 2004 PAPER NO :
FOR : ARYL OR HETEROARYL FUSED IMIDAZOLE COMPOUNDS AS
ANTI-INFLAMMATORY AND ANALGESIC AGENTS

Response Under 37 C.F.R § 1.111(a)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the Office Action January 26, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 19 of this paper.